

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S PLUGGING REPORT

OFFICE USE ONLY
Log No. 125214
Permit No. _____
Basin _____

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in
accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 38517
WELL NAME (if applicable): _____ Well#10

1 OWNER Clark County - Water Reclamation
MAILING ADDRESS 5857 E Flamingo Rd
Las Vegas NV 89122

ADDRESS AT WELL LOCATION 4150 South Hollywood Blvd.
Clark County, Las Vegas NV
Subdivision Name: _____ County: Clark

2 LOCATION SE $\frac{1}{4}$ NW $\frac{1}{4}$ Sec 23 T 21S N/S R 62 E
PERMIT/WAIVER No. DW-1409 161-23-101-001
Issued by Water Resources Parcel No.

Latitude 36.109046 "N UTM E NAD 27
Longitude 115.024096 "W N NAD 83/WGS 8

3 TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

Is this well being plugged because a replacement well was drilled? No
If yes, what is replacement well NOI?

Is there an existing well log? Yes
If yes, what is NDWR well log #? NOI 74258

4 EXISTING WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 Feet

7 WELL PLUGGING PROCEDURE
Was well cleaned out to total depth? yes no
If well was not cleaned out to total depth, please explain why:

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	SCH 40	0	40

Was the well contaminated? yes no
Was the casing pulled? yes no
If pulled from: 0 feet to 40 feet
Was the casing over drilled? yes no

Existing Perforations:
Type of perforation machine slot
Size of perforation 0.032
From 20 feet to 40 feet
From _____ feet to _____ feet

If casing was left in place, please show where additional perforations were made:
Additional Perforations:

Type of perforater used:

From	feet to	feet	Number of perfs per linear foot
From	feet to	feet	Number of perfs per linear foot
From	feet to	feet	Number of perfs per linear foot
From	feet to	feet	Number of perfs per linear foot
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From	feet to	feet	Number of perfs per linear foot
From	feet to	feet	Number of perfs per linear foot

5 WATER LEVEL
Static water level 5 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

6 Additional Notes or Comments

TYPE OF WELL = Temporary Dewatering

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	lbs/gal	% bentonite	Method
From	0	10	concrete grout			<input checked="" type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
From	10	12	bentonite seal			<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
From	12	40	impact sand gravel			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From	feet to	feet				<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From	feet to	feet				<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From	feet to	feet				<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

DCNR/DWR/SNBO
RECEIVED
MAY 04 2016

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started 4/4/2016
Date Completed 4/4/2016

9 DRILLER'S CERTIFICATION
This well was plugged and abandoned under my supervision and the report is true to the best of my knowledge.

Name Viking Drillers, Inc Contractor
Address 5950 Granite Lake Dr. Granite Bay CA 95746 Contractor

Nevada contractor's license number _____
issued by the State Contractor's Board 0034680

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2361

Signed [Signature]
By driller performing actual drilling on site or contractor

Date 5/2/16

36.1090718
-115.0232666
NAD
27